

REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Commissioner for Patents Mail Stop Reissue P.O. Box 1450 Alexandria, VA 22313-1450	Attorney Docket No.	2271/53467-A1
	First Named Inventor	Sunichi SATO
	Original Patent Number	5,904,549
	Original Patent Issue Date (Month/Day/Year)	05/18/1999
	Express Mail Label No.	EV 325702590 US

APPLICATION FOR REISSUE OF:
 (Check applicable box)


Utility Patent



Design Patent



Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)	ACCOMPANYING APPLICATION PARTS
1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee processing)	10. <input checked="" type="checkbox"/> Statement of status and support for all changes to the claims. See 37 CFR 1.173 (c).
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	11. <input type="checkbox"/> Original U.S. Patent for surrender
3. <input checked="" type="checkbox"/> Specification and Claims in double column copy of patent format (amended, if appropriate)	<input type="checkbox"/> Ribboned Original Patent Grant
4. <input checked="" type="checkbox"/> Drawing(s) (proposed amendments, if appropriate)	<input type="checkbox"/> Statement of Loss (PTO/SB/55)
5. <input checked="" type="checkbox"/> Reissue Oath/Declaration (original or copy) (37 C.F.R. § 1.175) (PTO/SB/51 or 52)	12. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) (if applicable)
6. <input type="checkbox"/> Power of Attorney	13. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
7. Original U.S. Patent currently assigned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (If Yes, check applicable box(es))	14. <input type="checkbox"/> English Translation of Reissue Oath/Declaration (if applicable)
<input checked="" type="checkbox"/> Written Consent of all Assignees (PTO/SB/53)	15. <input checked="" type="checkbox"/> Preliminary Amendment
<input checked="" type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (PTO/SB/96)	16. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
8. <input type="checkbox"/> CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table	17. Other: _____
9. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary)	
a. <input type="checkbox"/> Computer Readable Form (CRF)	
b. Specification Sequence Listing on:	
i. <input type="checkbox"/> CD-ROM (2 copies) or CD-R (2 copies); or	
ii. <input type="checkbox"/> paper	
c. <input type="checkbox"/> Statements verifying identity of above copies	

18. CORRESPONDENCE ADDRESS

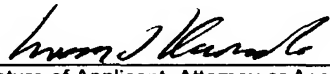
<input checked="" type="checkbox"/> Customer Number or Bar Code Label	23432	or <input type="checkbox"/> Correspondence address below
(Insert Customer No. or Attach bar code label here)		
PATENT TRADEMARK OFFICE		
Name		
Address		
City	State	Zip Code
Country	Telephone	Fax

NAME (Print/Type)	Iyan S. Kavrukov	Registration No. (Attorney/Agent)	25,161
Signature	<i>Iyan S. Kavrukov</i>	Date	June 24, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Reissue, Washington, DC 20231.

The PTO did not receive the following listed item(s) drawing page 4 and 6

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 2271/53467-A1		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A) 21	Total Claims (37 CFR 1.16(j)) Independent claims (37 CFR 1.16(i))	(B) 38	**** 17 =	x \$ _____ =	or	x \$ 18 =	306.00	
(C) 6		(D) 21	* 15 =	x \$ _____ =		x \$ 84 =	1260.00	
Basic Fee (37 CFR 1.16(h)) \$ _____							\$750.00	
Total Filing Fee \$ _____						OR	\$2316.00	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	*	x \$ _____ =		x \$ _____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ _____ =		x \$ _____ =	
Total Additional Fee \$ _____						OR	\$ _____	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. <u>03-3125</u>. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ <u>2316.00</u> to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p style="text-align: center;">WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 45%;"> <p><u>June 24, 2003</u></p> <p>Date</p> </div> <div style="width: 45%; text-align: center;"> <p></p> <p>Signature of Applicant, Attorney or Agent of Record</p> <p>Ivan S. Kavrukov</p> <p>Typed or printed name</p> </div> </div>								

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Reissue Application Of: Shunichi SATO

For: METHODS FOR GROWING SEMICONDUCTORS AND
DEVICES THEREOF FROM THE ALLOY
SEMICONDUCTOR GAINNAS

Reissue Application No.: Continuation of Reissue Application S.N. 09/860,369

Reissue Application Filing Date: Concurrently herewith

Original Patent No.: 5,904,549

Original Patent Granted On: May 18, 1999

1185 Avenue of the Americas
New York, New York 10036

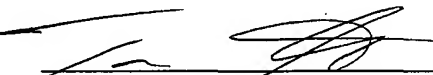
Mail Stop Reissue
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

EXPRESS MAIL LETTER OF TRANSMITTAL

Express Mail mailing label number EV325702590US
Date of Deposit June 24, 2003

Sir:

I hereby certify that the above-identified continuation reissue application (consisting of the Abstract, 6-page specification, 21 original cancelled patent claims, 7 sheets of formal drawings, Cont. Reissue Application Declaration by Inventor, Consent of Assignee, Statement under 37 C.F.R. 3.73(b), Statement Pursuant to 37 CFR 1.173(c), Preliminary Amendment, 3 copies of transmittal form, and check for the \$2,316 filing fee) is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.


Cooper & Dunham Employee *TRIN*
Depositing Express Mail Material *1500A*

Attorney for Applicant:
Ivan S. Kavrukov, Reg. No. 25,161
Cooper & Dunham LLP
Tel. (212) 278-0400